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Substitute for form 1449/FTO Modified	Complete if Known		
	Application Number	09/977,818	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)	Confirmation No.: Filing Date: First Named Inventor: Art Unit: Examiner Name:	4512 October 15, 2001 Williams et al. 2113 Manoskey, Joseph D.	
Sheet 1 of 2	Attorney Docket Number:	5681-53300	

			U.S. PATE	NT DOCUMENTS	
Examiner Initials*	Cite No. <sup>1</sup>	Document Number  Number-Kind Code (if known)	Publication Date MM- DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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JDM	ВІ	EP 0 543 582	05-26-93	Hartung et al.		
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Examiner	/Tananh D Wanasham/	Date Considered	
Signature	/Joseph D Manoskey/		06/21/2006

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to application. Applicant's unique citation designation number (optional).

Manoskey, Joseph D.

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Substitute for form 1449/PTO Modified Complete if Known 09/977,818 **Application Number** Confirmation No.: 4512 INFORMATION DISCLOSURE Filing Date: October 15, 2001 STATEMENT BY APPLICANT Williams et al. First Named Inventor: (Use as many sheets as necessary) Art Unit: 2113

Examiner Name:

Attorney Docket Number: 5681-53300 Sheet 2 of

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>				
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